



## PRIZE INDEMNIFICATION APPLICATION

1. First Named Insured \_\_\_\_\_
2. Other Insured(s) \_\_\_\_\_
3. Mailing Address \_\_\_\_\_  

Street
City
County
State
ZIP Code
4. Email Address \_\_\_\_\_
5. Location of Event \_\_\_\_\_
6. Event Dates \_\_\_\_\_
7. Total Number of Days of Contest:  
 1 Day Contest   
  2 Day Contest   
  3 Day Contest   
  More than 3 days
8. Number of Participants \_\_\_\_\_
9. Check box that applies:   
  Prize Reinstated   
  Prize Not Reinstated
10. Any Prior Prize Indemnification Losses? If yes, please describe (Use separate sheet if necessary.)  
 \_\_\_\_\_
11. Amount of Coverage Desired \$ \_\_\_\_\_

### Hole-In-One

1. Tournament Title \_\_\_\_\_
2. Name of Course \_\_\_\_\_
3. Number of 18-hole rounds to be played \_\_\_\_\_

Hole(s) to be Covered

<u>Hole No.</u>	<u>Length in Yards</u>	<u>Prize Description</u>	<u>Valued at \$</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

How many hole-in-ones have been made on this hole in the past 5 years? \_\_\_\_\_

12. PLEASE SUBMIT A SAMPLE SCORECARD. The following requirements apply to Hole-In-One coverage and losses are excluded if any of these requirements are not met.

a. All players must be amateurs.
b. Two appointed target-hole observers must be stationed at each designated prize hole at all times during the tournament, one at the tee, the other at the green.
c. Certification of Achievement of the hole-in-one must be made by two appointed observers as noted in b. above, the successful competitor and the club secretary.
d. Score cards must be completed for the rounds played in the tournament, including the round in which the hole-in-one was made.
e. The hole-in-one must occur during official tournament play by an official player.
f. Practice shots must not be permitted and all shots must be made in the regular round of tournament play.

- g. The actual length of the selected hole(s) during the event stated above must not be less than the yardage stated.
- h. All equipment used during the tournament must conform to the specifications issued by the International Professional Golfers Association and the tournament itself must be conducted in accordance with the rules issued by the authorities conducting the tournament.
- i. For each designated prize hole, the green must not be specifically prepared or altered from the condition which is usual for normal play, and the hole must not be positioned on the green to facilitate a Hole-In-One.

### Tagged Fish Contests

1. Acreage of Lake: \_\_\_\_\_
2. Number of Participants: \_\_\_\_\_
3. Number of Tagged Fish: \_\_\_\_\_
4. Name of Lake: \_\_\_\_\_
5. Who is responsible for releasing the fish?     Local Game & Fish Department  
 Other (explain) \_\_\_\_\_

The following requirements apply to Tagged Fish Contests coverage and losses are excluded if any of these requirements are not met.

- |   |
|---|
| a. The tagged fish must be in good health at the time of release and alive at the time of catch.  |
| b. Current or former professional fishermen must be ineligible to participate. The successful competitor must be registered in the fishing contest at least 24 hours prior to catching the tagged fish. |
| c. The tagged fish must be caught using only a fishing rod and line.  |
| d. The site and time of release of the tagged fish must be unknown to competitors.  |
| e. The tagged fish must be released no earlier than twelve (12) hours prior to beginning of the contest.  |
| f. Use of sonar guns, underwater video cameras, and metal detectors in the contest must be prohibited.  |

### Basketball Shoots

<b>Type of Shot:</b>	<input type="checkbox"/> Lay-Up	<input type="checkbox"/> Free Throw	<input type="checkbox"/> Top-of-the-Key	<input type="checkbox"/> Half Court
	<input type="checkbox"/> Three Quarter Court	<input type="checkbox"/> A combination of 4 shots within a time limit	If so, what is the time limit?	

1. Number of Shots Allowed: \_\_\_\_\_
2. Is the court regulation, professional size (94) feet? \_\_\_\_\_ If no, what is the length of the court? \_\_\_\_\_
3. Are participants chosen at random?     Yes     No
4. Do participants retrieve their own ball?     Yes     No
5. Are current or former professional, college, or high school players allowed to participate?     Yes     No

## Bowling Tournaments (Perfect 300 Games)

1. Number of Games Bowled: \_\_\_\_\_
2. Number of Participants: \_\_\_\_\_

The following Bowling Tournament Coverage requirements apply:

a. The perfect game is played by an official participant during official play. It is conducted according to the rules of bowling as defined by the American Bowling Congress (ABC) and the Women's International Bowling Congress (WIBC).	<input type="checkbox"/> Yes	<input type="checkbox"/> No
b. The perfect game occurs on a lane with equipment which meets the standards of the ABC or WIBC. <i>Please Note: Any blocking, walling or grooving of lanes, or dressing other than that approved by the ABC or WIBC will void coverage.</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
c. The tournament committee representatives are stationed at the selected lanes at all times during the tournament.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
d. The prize shall be made available to amateur bowlers (as defined by the ABC and WIBC); however, the total number of games bowled must not exceed the figures agreed upon and shown on the policy.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
e. The perfect game occurs on the date(s) indicated at the designated bowling facility.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
f. Current or former professionals and bowlers with an average of 210 or higher are ineligible to participate.	<input type="checkbox"/> Yes	<input type="checkbox"/> No

### Other Contests

Number of Contestants: \_\_\_\_\_  
 Provide a copy of rules for the contest.  
 Provide any additional information that may be relevant.

*No automatic Reinstatement of Prize.  
 Any policy issued will be based upon the above information.*

### IMPORTANT NOTICE

#### DECLARATION

I DECLARE THAT THE STATEMENTS MADE IN THIS APPLICATION ARE COMPLETE AND TRUE.

Any person who, with the intent to defraud or knowing that he or she is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement may be guilty of insurance fraud and subject to fines and/or imprisonment. I agree that any intentional concealment or misrepresentation of a material fact concerning this insurance or the subject thereof may void any policy issued.

As part of our underwriting procedures, a routine inquiry may be made to obtain applicable information concerning character, general reputation, and credit history. Upon your written request, additional information as to the nature and scope of the report, if one is made, will provided.

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Signature of Applicant Title Date

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Signature of Producing Agent Date

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Agent Name and Address

## **IMPORTANT NOTICE REGARDING COMPENSATION DISCLOSURE**

For information about how Northfield compensates its agents, brokers and program managers, please visit this website:

[http://www.northlandins.com/Producer\\_Compensation\\_Disclosure.asp](http://www.northlandins.com/Producer_Compensation_Disclosure.asp)

If you prefer, you can call the following toll-free number: 1-866-904-8348. Or you can write to us at Northfield Insurance Company, c/o Law Department, 385 Washington St., St. Paul, MN 55102.